

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

PAGE	1	OF	3
FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) Black PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00609388 </div>
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Check if ☒ 24-hour report ☐ 48-hour report ➤
☒ New report ☐ Amends report filed on MM / DD / YYYY

Full Name of Payee Hawfish, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2020	
Mailing Address 909 3rd Ave FI 15		Amount 60000.00	
City New York	State NY	Zip Code 10022-4745	Transaction ID : VTDG0AEYZE5 Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Digital Advertising - Estimate		Category/ Type	
Name of Federal Candidate Biden, Joseph, R., , Jr.		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought		16113659.46	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ►

Full Name of Payee Hawkfish, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2020	
Mailing Address 909 3rd Ave FI 15		Amount 45265.00	
City New York	State NY	Zip Code 10022-4745	Transaction ID : VTG0AEYZF3 Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Digital Advertising - Estimate		Category/ Type	
Name of Federal Candidate Trump, Donald, J., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 16113659.46		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	105265.00
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shropshire, Adrianne, R., ,

[Electronically Filed]

Date _____

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 3
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NAME OF COMMITTEE (In Full) Black PAC		FEC IDENTIFICATION NUMBER ▼ C C00609388	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; margin:0 5px;">M M M</table> / <table border="1" style="display:inline-table; margin:0 5px;">D D D</table> / <table border="1" style="display:inline-table; margin:0 5px;">Y Y Y Y Y Y Y Y</table>	

Full Name of Payee On Cue Analytics LLC			Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;">11</table> / <table border="1" style="display:inline-table; margin:0 5px;">01</table> / <table border="1" style="display:inline-table; margin:0 5px;">2020</table>		
Mailing Address 76 Saint James Pl Apt 4B			Amount <table border="1" style="display:inline-table; margin:0 5px;">500000.00</table>		
City Brooklyn	State NY	Zip Code 11238-1249	Transaction ID : VTDG0AEYZA4 Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;">M M M</table> / <table border="1" style="display:inline-table; margin:0 5px;">D D D</table> / <table border="1" style="display:inline-table; margin:0 5px;">Y Y Y Y Y Y Y Y</table>		
Purpose of Expenditure Telephone Calls - Estimate		Category/ Type <table border="1" style="display:inline-table; margin:0 5px;"></table>			
Name of Federal Candidate Biden, Joseph, R., , Jr.		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="display:inline-table; margin:0 5px;">16113659.46</table>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee OTG Strategies			Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;">11</table> / <table border="1" style="display:inline-table; margin:0 5px;">01</table> / <table border="1" style="display:inline-table; margin:0 5px;">2020</table>		
Mailing Address PO Box 69338			Amount <table border="1" style="display:inline-table; margin:0 5px;">100000.00</table>		
City Saint Louis	State MO	Zip Code 63169-0338	Transaction ID : VTDG0AEYZB1 Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;">M M M</table> / <table border="1" style="display:inline-table; margin:0 5px;">D D D</table> / <table border="1" style="display:inline-table; margin:0 5px;">Y Y Y Y Y Y Y Y</table>		
Purpose of Expenditure Canvassing - Estimate		Category/ Type <table border="1" style="display:inline-table; margin:0 5px;"></table>			
Name of Federal Candidate Biden, Joseph, R., , Jr.		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="display:inline-table; margin:0 5px;">16113659.46</table>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<table border="1" style="display:inline-table; margin:0 5px;">600000.00</table>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<table border="1" style="display:inline-table; margin:0 5px;"></table>
(c) TOTAL Independent Expenditures.....▶	<table border="1" style="display:inline-table; margin:0 5px;"></table>

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Shropshire, Adrienne, R., ,

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Date

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Signature

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee OTG Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2020	
Mailing Address PO Box 69338		Amount 175000.00	
City Saint Louis	State MO	Zip Code 63169-0338	Transaction ID : VTDG0AEYZC9
Purpose of Expenditure Canvassing - Estimate	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Biden, Joseph, R., , Jr.		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

16113659.46

Full Name of Payee OTG Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2020	
Mailing Address PO Box 69338		Amount 175000.00	
City Saint Louis	State MO	Zip Code 63169-0338	Transaction ID : VTDG0AEYZD7
Purpose of Expenditure Canvassing - Estimate	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Peters, Gary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: MI	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

3217159.50

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	350000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	1055265.00

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Shropshire, Adrienne, R., ,

[Electronically Filed]

Date

MM / DD / YYYY
11 / 03 / 2020

Signature